



Shrink Packaging Equipment Form

Date _____

Easteys DSM _____

Customer Information:

Customer Name _____

Distributor Name _____

Customer Contact _____

Distributor Contact _____

Street Address _____

Street Address _____

City, ST, Zip _____

City, ST, Zip _____

Phone Number _____

Phone Number _____

E-mail _____

E-mail _____

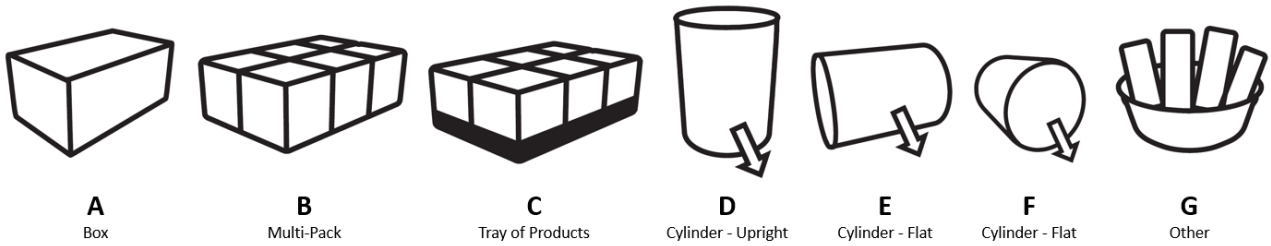
Product Information:

Application: Shrink Bundle Other (specify): _____

Description of Product to be Wrapped/Bundled:

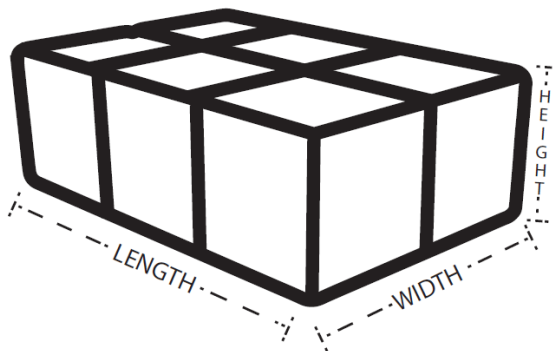
Please e-mail or fax the completed form to: info@easteys.com or 763-795-8867

Product Orientation:



Product Dimensions	Product #1	Product #2	Product #3	Product #4	Product #5	Product #6	Product #7	Product #8	Product #9
Product Orientation (see above):									
Individual Length/Diameter:									
Individual Width/Diameter:									
Individual Height:									
Individual Weight:									
Individual Products per Minute:									
Bundle/Multi-Pack Length:									
Bundle/Multi-Pack Width:									
Bundle/Multi-Pack Height:									
Bundle/Multi-Pack Weight:									
Bundle/Multi-Packs per Minute:									
Pack Pattern (see example below):									

Example:



OF UNITS (L x W x H)

LENGTH = 3

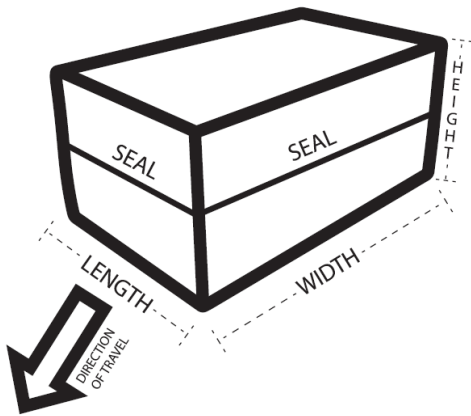
WIDTH = 2

HEIGHT = 1

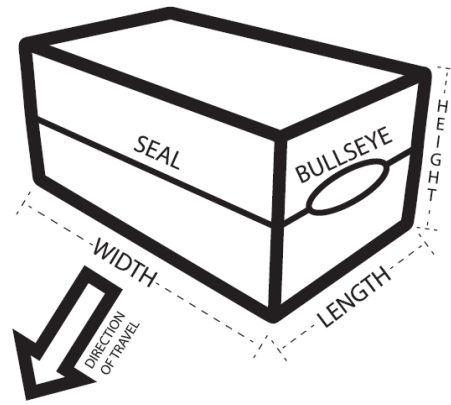
OF UNITS = 6

(PACK PATTERN = 3 x 2 x 1)

Does the Wrapped Package Require Fully Enclosed or Bulls-Eye/Bundler Enclosure?

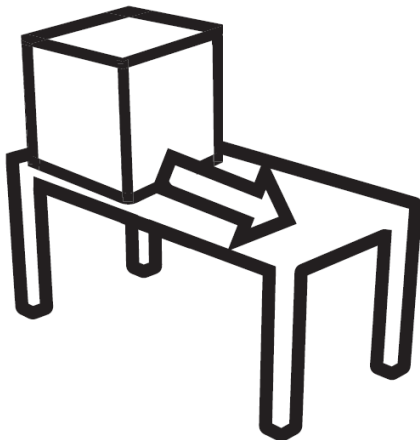


Fully Enclosed

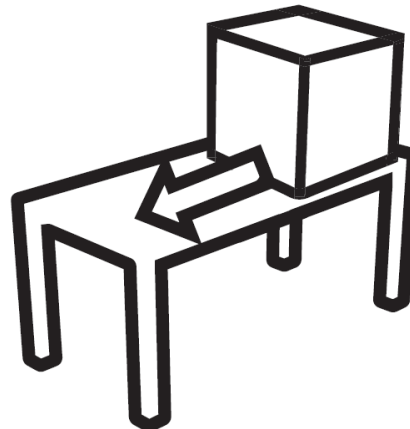


Bulls-Eye/Bundler

Machine Direction:



Left Handed



Right Handed

(Machine direction is determined by the normal operator's position in relation to the infeed conveyor. When the operator is facing the shrink wrapper and the product is coming from the right, the machine is right-handed.)

How Will Products be Introduced to the Wrapper?

- Hand Fed (Workers placing product by hand onto wrapper)
- Random (No specific spacing between products)
- Conveyor (Product is fed end-to-end with no separation between units)
- Lug (Products arrive in groups with random empty gaps)
- Pitch (A consistent set spacing between each product with no variation)
- Other (specify): _____

Does the Application Require Product Guides? Yes No

Are there special Height Requirements for the machine? If so, please list height in inches. _____

Equipment Specifications:

Electrical: 240 VAC 480 VAC
Plant Air Supply: _____ PSI _____ CFM
Plant Temp. Range: _____ to _____ (°F)
Plant Environment: Wet Dry
Shifts per Day: _____
Days per Week: _____
Space Constraints: No Yes (list measurements below)

Please Describe any Options or Details Not Covered by the Selections Listed Above.

Film Information:

Film Manufacturer: _____
Film Type: _____
Film Size: _____
Film Gauge: _____
Film Finishing: Folded Flat Pre-Perforated

Order Timing and Competitive Information:

Quote Needed: Budgetary Quote Formal Quote (project is budgeted)
Purchase Time Frame: 0 - 90 days 90-180 days 180+ days
Is the Project Funded? Yes No
Competitive Manufacturer: _____
Competitive Model: _____

Please attach any spec packages or pictures of product(s) to be wrapped when submitting this equipment form. Please e-mail or fax the completed form to: info@eastey.com or 763-795-8867.